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CONFIRMATION NO. 3073

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/676,815	10/01/2003	623	3738	9542.18429-FOR
APPLICANTS John A. Macoviak, La Jolla, CA; Robert T. Chang, Belmont, CA; David A. Rahdert, San Francisco, CA; Timothy R. Machold, Moss Beach, CA; Rick A. Soss, Burlingame, CA;				
** CONTINUING DATA ***** This application is a CIP of 09/666,617 09/20/2000 PAT 6,893,459 and is a CIP of PCT/US02/31376 10/01/2002 which claims benefit of 60/326,590 10/01/2001 This application 10/676,815 10/01/2003 claims benefit of 60/429,462 11/26/2002 and claims benefit of 60/429,709 11/26/2002 and claims benefit of 60/429,444 11/26/2002				
** FOREIGN APPLICATIONS *****				
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 12/24/2003				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ALVIN J STEWART/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance AS Initials	STATE OR COUNTRY CA	SHEETS DRAWINGS 9	TOTAL CLAIMS 24
INDEPENDENT CLAIMS 1				
ADDRESS RYAN KROMHOLZ & MANION, S.C. POST OFFICE BOX 26618 MILWAUKEE, WI 53226 UNITED STATES				
TITLE Devices, systems, and methods for supplementing, repairing, or replacing a native heart valve leaflet				
FILING FEE RECEIVED 486	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	